



Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Dr. Jules T. Mitchell  
Target Health, Inc.  
310 Madison Avenue, 22nd Floor  
New York, New York 10017

JUL 29 1997

Re: K971009  
Trade Name: SCAR CARE™  
Regulatory Class: Unclassified  
Product Code: MDA  
Dated: June 17, 1997  
Received: June 17, 1997

Dear Dr. Mitchell:

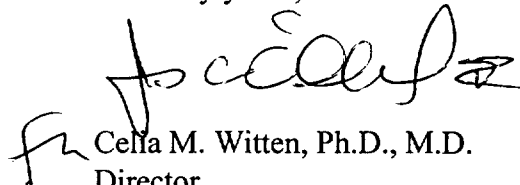
We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4595. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "<http://www.fda.gov/cdrh/dsmamain.html>".

Sincerely yours,

A handwritten signature in dark ink, appearing to read 'C. Witten', is written over the typed name.

Cella M. Witten, Ph.D., M.D.  
Director  
Division of General and  
Restorative Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

K971009

Life Medical Sciences, Inc.  
379 Thornall Street  
Edison, NJ 08837

JUL 29 1997

**SCAR CARE™**  
510(K) Number: K971009  
Amendment 1: March 28, 1997  
Amendment 2: June 17, 1997

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12.510(k) Summary

**SCAR CARE™ FOR THE  
KELOID SCARS**

**MANAGEMENT OF HYPERTROPHIC OR**

**Contact:** Target Health, Inc.  
310 Madison Avenue, 22nd Floor  
New York, NY 10017

**Tel: 212 681 2100**  
**Fax: 212 682 0151**

**Sponsor:** Life Medical Sciences, Inc.  
379 Thornall Street  
Edison, NJ 08837-2227 USA

**Dr. Eli Pines**

**Tel: 908 494 0444**  
**Fax: 908 494 6252**

a. Device Name

SCAR CARE™ is provided as follows:

- a. Trade Name - SCAR CARE™
- b. Common Name - Topical dressing for hypertrophic and keloid scars
- c. Classification Name - Not available

b. Predicate Device/ Company Names and Addresses

The predicate device is listed below with its 510(k) clearance number.

TopiGel™ Gel Sheeting	K 913140	CUI Corporation PO Box 40288 Santa Barbara, CA 93140
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c. Description of Device

SCAR CARE™ is a device composed of an outer shell consisting of medical grade silicone sheets adherent to each other with a sealed internal component filled with medical grade silicone oil. It is a soft, semi-transparent rubbery device.

d. Intended Use

For the management of hypertrophic or keloid scars.

K971009

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SCAR CARE™  
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# INDICATION FOR USE

SCAR CARE™ is intended for use in the management of hypertrophic and keloid scars.

  
(Division Sign-Off)  
Division of General Restorative Devices  
510(k) Number K971009

Prescription Use X  
(Per 21 CFR 801.109)

Over-the-Counter Use \_\_\_\_\_

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